

Questions	Answers
<p>1. Transporting people to appointments: Fuel Costs are climbing can we come back and adjust the contract at some point if needed?</p>	<p>1. The Transition Coordinator is not required to transport MFP recipients to appointments. These recipients are covered by Medicaid and so can access non –emergency medical transportation to and from medical appointments via the Medicaid transportation broker, Logisticare.</p>
<p>2. Section 4.0 Prohibited Activities states that (4.1) “The provider agency cannot have a contract to provide any other <b><i>Finding A Way Home</i></b> demonstration services. (4.2) The Provider agency cannot have a contract to provide any services under the DSAAPD E&amp;D HCB Waiver program or DDDS MR/DD HCB Waiver program. Does this mean a contractor cannot provide these contracted HCB Waiver services to the 25 customers served by Transition Coordinator Services? Or is this a blanket exclusion of any and all contracted providers holding any HCB Waivers Service Contracts with DSAAPD E&amp;D or DDDS MR/DD?</p>	<p>2. Existing HCBS providers may continue to provide waiver services. Those same providers can not contract for transition coordinator service. The agency cannot have a contract to provide any services under any of the HCBS Waivers that will interface with the MFP project. If the agency is considering providing transition coordinator services they may not be a provider of any other MFP demonstration service.</p>
<p>3. Section 1.2 Background and Purpose identifies approximately 25 eligible Delawareans to be served under this program from 9-1-08 to 9-30-09. It goes on to say that “This is a new program ...and is anticipated to provide services to approximately 100 individuals over the course of the project. Does this mean that a total (Maximum) of 25 eligible persons will get service the first contract period (13 months)? Or is it the intention for more than one entity to receive a contract and 25 participants is an approximate (maximum) number to be served by each</p>	<p>3. Consideration will be made to award a contract to more than one entity to allow choice of provider to 25 eligible MFP recipients each year. Total number of recipients to be served each grant year under MFP is 25 recipients per year.</p>

entity awarded a contract?	
4. Based on the above clarification, what is the appropriated or anticipated level of funding for this program during the first 13 month contract? If applicable, what is the total appropriated or anticipated level of funding for then entire project?	4. The level of funding is based on the service usage not to exceed the grant award amount.
5. Does the Department have a set guideline for ‘maximum allocation per eligible” or an “average allocation per eligible “that was used to develop/estimate the funding budget for the contract period or the project period?	5. Provider agencies are responsible for developing their own budget based on the services standard specification & usage.
6. What is the Division targeting as an average # of hours per transition client?	6. The average # of hours differs for each individual. The standard service unit is 1 hour. See section 5.0, 5.1, 5.2 & 5.3 of the RFP
7. Section 5.1.3: Indicates that a Self Certification Tracking Form is required as an inclusion (as listed on the table of contents page 48 of the RFP document (Appendix J) . If the company is NOT requesting consideration as Minority or Women Business enterprise may we omit this required form or should the form be included and noted as “not applicable”?	7. Please include the form and note as “Not Applicable”
8. Section 5.3.1 Budget worksheets & Supplement page 18 of the RFP document references worksheets to be completed under Attachment B. Attachment B appears to include the description of Allowable costs and the Instructions’ for line items. Will the Department provide a worksheet or a form to be completed for	8. A worksheet is attached for your use. It was developed in Excel. <b>Please see the addendum 2B for more information.</b>

inclusion in the RFP Proposal responses? If No, are we expected to develop one	
9. Service Specifications outlined under Attachment B describes the role and expectation of services under this RFP. Based on the outlined services, has the department established Professional Requirements for person providing Transition Coordination Services under this RFP? (ie: nursing License, Degree in Social Services , etc)	<p>9. On page 37 6.3 states:</p> <p>6.3 Transition Coordinator must have the following qualifications:</p> <p>6.3.1 Experience with the multiple populations being served including those who are elderly, physically disabled, developmentally disabled, and/or those with mental health challenges.</p> <p>6.3.1 Experience in case management which includes assessing, planning, developing, implementing, monitoring, and evaluating options and services to meet an individuals human service needs using effective counseling or interviewing techniques as well as other available resources such as service plans or case management systems.</p> <p>6.3.2 Skill in interviewing, oral and written communication and interpersonal relations for effective interactions with client/family providers and agencies.</p> <p>6.3.3 Knowledge of community services, resources and standards of health care and service delivery.</p> <p>6.3.4 Ability to gather, compile, and record, information for comprehensive statistical and narrative reports and summaries as required.</p> <p>* Degree in SW or Human Services is preferred.</p>
10. Will the division provide a list of contracted HCB Waiver providers for the candidates to choose from or will Transition Coordinators be expected to find and recommend a provider?	10. The provider(s) awarded the contract will be provided with information to assist with the transition process
11. Does the Division have an existing Quality of Life Survey as referenced in Services Specifications?	11. After contract is awarded provider(s) will be given a copy after the State receives approval from CMS
12. Service Specifications Section 3.2 of the RFP states that the provider is to	12. Any public and private Medicaid enrolled nursing facilities, Intermediate Care Facilities for MR-ICF/MR

<p>conduct informational seminars at qualified institutions.</p> <p>Will the provider receive a listing of which institutions the division deems as “qualified” or will any facility that has Medicaid beds be considered a "qualified" institution?</p>	<p>and DPC. The Division would determine the individual’s eligibility for MFP at the time of the referral of the individual.</p>
<p>13. Section 2.0 Eligibility states that DMMA will determine eligibility if the candidate for Transition Coordination Services. Is there an established threshold for the candidate(s) to have decisional capacity or a designated guardian in place for use by the Transitional Coordinator?</p>	<p>13. Part of the assessment process the transition coordinator does involves determining the legal status of each candidate prior to gaining a signature of informed consent. The coordinator will obtain a copy the legal documents, review it with them and have an understanding of the extent of the surrogate decision-maker power that exists. The information can be garnered from a review of the facility records once the individual permission is obtained. (<i>ref pg 33 3.2.4</i>)</p>
<p>14. Section 5.0 Service Unit Establishes the standard service unit as 1 hour with the minimum billable unit as a quarter hour. Please confirm provider will be allowed to bill for time spent on the phone arranging services?</p>	<p>14. Travel time is not included in the reimbursement rate. Billable time shall be documented appropriately by the provider and must comply with the provider regulations. Service time logs are required to be submitted to the MFP Project Director on a monthly basis.</p>
<p>15. Please confirm the division will also allow the provider to bill for seminar hours required under the Service Specifications.</p>	<p>15. That would be reflected in detail in your budget narrative based on projections and /or assumptions. Provider would be responsible for providing any training.</p>
<p>16. This section does not state it will only accept a flat hourly rate for services. Will the Division accept a flat rate (enrollee start up fee) plus hourly service rate for their RFP or does the department prefer hourly rate only and a proposed # of hours?</p>	<p>16 Hourly rate and proposed number of hours.</p>
<p>17. Addendum 1 corrects the maximum mileage reimbursement amount to \$0.47/mile</p>	<p>\$0.47 is the mileage to be calculated</p>

18. What is the total Budget amount?	18. Provider should base their budget amounts on the costs the agency will incur to start up this project
19. Can we apply for only one (1) county?	19. No. This is for all three (3) counties.
20. State budget cuts: Will they affect the contracts in any way?	20. No. Federal funding has been obtained through September 2011. The needed state funds have been approved for State Fiscal Year 2009. We do not anticipate that the State will fail to approve the state funds needed in SFY 2010-2012 as this would cause the program to end and having to send the federal grant funds back to the federal government.
21. Is this Federal money that goes away when the 3 years are up?	21. This program is being funded by both the federal CMS Money Follows the Person grant and by the state tobacco dollars. The federal grant money will end September 2011. This Money Follows the Person program will end at that time as well. So the contract for Transition Coordinators will also end permanently at the end of September 2011.
22. Will the individuals targeted for MFP be elderly? Mentally challenged, and /or physically challenged?	22. Could be any of the above mentioned targeted individuals. Selected provider should have experience in all target group populations.
23. State of Delaware is cutting attendance services. Would this effect series under MFP?	23. No. MFP funding is available through September 2011. Not cuts in Transition Coordinator services are anticipated during this time period.
24. Passport to Independence had a very long wait for housing ..maybe up to a year. What are we suppose to do during ht long wait? Will that effect the 365 day on the program?	24. We believe that housing will be an issue for the MFP program as well. However, we are meeting with the various Public Housing Authorities and are attempting to obtain needed housing resources for the MFP recipients. The recipients' 365 days on the program does not begin until the day the individual moves out into the community.
25. Is Assisted Living facility an option for housing?	25. Federal MFP rules prohibit MFP recipients from residing in residences where there are more that 4 unrelated individuals (example, neighborhood group homes with more that 4 residents). Therefore, the majority of Assisted Living Facilities are not residential options for MFOP recipients. However, if a floor with and apartment complex would become licensed as an Assisted Living Facility; it may be an option for MFP recipients as the recipient would have their own apartment.
26. When changed from a Nursing home to the community has the wait for medication eligibility been taken care of? Experienced a problem obtaining it in the past in a timely manner.	26. MFP recipients must be eligible for Medicaid in order to qualify fro Medicaid. Therefore, Medicaid eligibility must be determined before they are placed in the MFP program. In addition, the Division of Services for Aging & Adults with Physical Disabilities (DSAAPD) has agreed to give MFP candidates priority

	in evaluating them for heir Home & Community Based Waiver. Medicaid Program coding will be completed by the LTC Finance Eligibility Units.
27. Individuals in Institutions do always have SS cards, ID cards, Birth certificates etc. Is there any help out there to help get that information in a timely manner?	27. We expect the Transition Coordinator to assist the MFP candidates obtaining these documents. This assistance would involve assisting them to contact the Social Security Administration to obtain a replacement social security card.
28. The RFP document references the Mandatory Submission Requirements Checklist included in Attachement C, however only the wording “Insert Mandatory Submission Requirements Checklist Here” is found on page 46 under Attachment C. Will the Department provide a copy worksheet(s) or a form(s) to be completed for inclusion in the RFP Proposal responses?	28. The attached form is provided for your use and inclusion in the proposal. <b>Please see the addendum 2C for more information.</b>